Effective October 1, 2003								10/809,554					
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL TYPE	ENTITY		OTHE	R THAN L ENTITY	
TOTAL CLAIMS								RATE	FE		PATE		
FOR			NUMBE	NUMBER FILED		NUMBER EXTRA		BASIC F	<del></del>		BASIC FE	+	
	TOTAL CHARG	124 0	) 24 minus 20=		• Ø		XS 9=		OF	XS18=	1		
'n	NDEPENDENT	3 minus 3 =		· &		]	X43=		OF	Voc	<del> </del>		
^	MULTIPLE DEPENDENT CLAIM PRESENT							+145=	1	7	`	<del>                                     </del>	
* If the difference in column 1 is less than zero, enter "0" in column						column 2		TOTAL		OF		0	
	CLAIMS AS AMENDED - PART II								·	OF		770	
3	21404	(Column 1)	<u>)</u> .	OTHER THAN SMALL ENTITY OR SMALL ENTITY									
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOU PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI TIONA FEE	VĽ.	RATE	ADDI- TIONAL FEE	
	Total	19	Minus	- 2	0_	= 0	11	X\$ 9=		OR	X\$18=		
AME	Independent	ENTATION OF M	Minus	PENDENT	<u>ろ</u>	<u> - O</u>	1 T	X43=		OR	X86=	·	
<u> </u>		,6,10,	OLTIFLE DE	PENDENT	·	<u> </u>	, L	+145=		OR	+290=		
	10,						, F	TOTAL	- B .	4	TOTAL		
		(Column 1)		(Columi	n 2)	(Calumn 3)		DDIT. FEE	L		ADDIT. FEE		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE: NUMBE PREVIOU PAID FO	ST ER ISLY	PRESENT EXTRA		RATE	ADDI- TIONA FEE		RATE	ADDI- TIONAL FEE	
	Total .	•	Minus	**		5		X\$ 9=		OR	X\$18=		
AME .	Independent	NTATION OF MU	Minus	***			$I \Gamma$	X43= ·		OR	X86=		
	7 1101 7 11232	NATION OF MO	LIFLE DE	ENDENT	LAIM	<u>· U</u> _	'	+145=		OR	+290=		
							- <b>L</b>	TOTAL DIT. FEE			TOTAL ODIT, FÉE		
_		(Column 1)	_ <u>.</u>	(Column	·2)	(Column 3)	~E			,	WUII. FEEL		
ונואו כ		CLAIMS REMAINING AFTER AMENDMENT		HIGHES NUMBEI PREVIOUS PAID FO	T R SLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	][	RÄTE	ADDI- TIONAL FEE	
MUNICIPOMEN	Total	•	Minus	**		•	5	<b>(\$ 9=</b>		OR	X\$18=		
	Independent		Minus	***		•		X43=		1	X86=		
PINST PRESENTATION OF MULTIPLE DEPENDENT CLAIM													
#145= OR +290=  If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ADDIT FEE													
, <b>11</b>	The "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ADDIT. FEE												
				<u> </u>						••			

Application or Docket Number